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APPLICANTS

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** CONTINUING DATA *****

None *None*

** FOREIGN APPLICATIONS *****

None *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

09/15/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 11	TOTAL CLAIMS 59	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Shallak</i> Initials <i>JB</i>				

ADDRESS

30449

TITLE

INCORPORATION OF UNCERTAINTY INFORMATION IN MODELING A CHARACTERISTIC OF A DEVICE

FILING FEE RECEIVED 1730	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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